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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/751,038	12/31/2003	Eric Boyd	324212003110	1932

TITLE OF INVENTION: OFFLINE-ONLINE INCENTIVE POINTS SYSTEM AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	$1440	$300	$0	$1740	09/02/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
DINH, MINH	2132	380-028000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 Morrison & Foerster LLP 2 _____ 3 _____

ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE   (B) RESIDENCE: (CITY and STATE OR COUNTRY)

    Yahoo! Inc.   Sunnyvale, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted: ☒ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies _____	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-1952 (enclose an extra copy of this form).

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Authorized Signature /Ernest Ellenberger/   Date August 4th, 2008

Typed or printed name Ernest Ellenberger   Registration No. 56,529

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